

**UNITED STATES
ENVIRONMENTAL PROTECTION AGENCY
REGION 10**

IN THE MATTER OF:

) Docket No.
) RCRA 10-2015-0011
)

Soldotna Y Chevron
EPA ID. No. AK518
Respondent

) **EXPEDITED SETTLEMENT**
) **AGREEMENT AND**
) **FINAL ORDER**
)

Mark Rozak 10-14-14
Mark Rozak

EXPEDITED SETTLEMENT AGREEMENT

1. The U.S. Environmental Protection Agency ("EPA") alleges that Soldotna Y Chevron ("Respondent"), owner or operator of the Underground Storage Tank(s) (USTs) at 44024 Sterling Highway, Soldotna, Alaska 99669 (the "UST Facility"), failed to comply with the following requirement(s) of Subtitle I of the Resource Conservation and Recovery Act (RCRA), 42 U.S.C. §§ 6991-6991m, and its implementing regulations at 40 C.F.R. part 280.
 - a. Failure to monitor one used oil tank at least every 30 days as required by 40 C.F.R. § 280.41(a) from at least July 1, 2013 through June 16, 2014. *Not correctable*
 - b. Failure to retain every record for release detection monitoring as required by 40 C.F.R. § 280.45 for July 2013, November 2013, January 2014, and February 2014 for tanks 1-4 and September and October 2013 for tank 4 only. *Not correctable*
 - c. Failure to provide any release detection for underground piping (no automatic line leak detector test, and no annual line tightness test or monthly release detection monitoring) as required by 40 C.F.R. § 280.44 for lines 2-4 from at least July 1, 2013 through June 20, 2014. *Not correctable*
 - d. Failure to equip pressurized piping with an automatic line leak detector as required by 40 C.F.R. § 280.41(b)(1)(i) for line 4. *Corrected see tankology invoice*
2. The EPA and the Respondent agree that settlement of this matter for a penalty of \$10,390 is in the public interest.
3. The EPA is authorized to enter into this Expedited Settlement Agreement and Final Order (ESA) pursuant to section 9006 of RCRA and 40 C.F.R. § 22.13(b).
4. In signing this ESA, the Respondent: (1) admits that the Respondent is subject to requirements listed above in Paragraph 1, (2) admits that the EPA has jurisdiction over the Respondent and the Respondent's conduct as alleged herein, (3) neither admits nor denies the factual allegations contained herein, (4) consents to the assessment of this penalty, and (5) waives any right to contest the allegations contained herein.

5. By its signature below, the Respondent certifies, subject to civil and criminal penalties for making a false submission to the United States Government, that he or she has: (1) corrected the alleged violations, (2) submitted true and accurate documentation of those corrections, (3) provided a deposit for payment of the civil penalty in Paragraph 2 above in accordance with the EPA penalty collection procedures provided to the Respondent, (4) submitted true and accurate proof of deposit for payment of the civil penalty with this ESA, and (5) agrees to release the deposit for payment to the EPA upon entry of this Order.
6. Upon filing, this ESA shall constitute full settlement of all claims for civil penalties under RCRA for the violation(s) alleged herein.
7. The EPA reserves all of its other rights to take enforcement action for any past, present, or future violations by the Respondent of RCRA, any other federal statute or regulation, or against any violations alleged to have been corrected pursuant to this ESA that were not corrected.
8. Upon signing and returning this ESA to the EPA, the Respondent waives the opportunity for a hearing or appeal pursuant to section 9006(b) of RCRA or 40 C.F.R. part 22.
9. Each party shall bear its own costs and fees, if any.
10. This ESA is binding on the parties signing below, and in accordance with 40 C.F.R. § 22.31(b), is effective upon filing.

IT IS SO AGREED,

Name (print): Mark Rozak

Title (print): Owner

Signature: 

Date 10-14-14

APPROVED BY EPA:

Edward J. Kowalski, Director
Office of Compliance and Enforcement
EPA Region 10

Date _____

IT IS SO ORDERED:

Socorro Rodriguez
Regional Judicial Officer

Date _____



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION 10

1200 Sixth Avenue, Suite 900
Seattle, Washington 98101-3140

SEP 18 2014

OFFICE OF
COMPLIANCE AND ENFORCEMENT

Reply To: OCE-082

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mark Rozak
Soldotna Y Chevron
44024 Sterling Highway
Soldotna, Alaska 99669

Re: Underground Storage Tank (UST) Compliance Inspection of Soldotna Y Chevron
44024 Sterling Highway, Soldotna, Alaska 99669
EPA UST ID AK518: Opportunity for Expedited Settlement within 30 Days

Dear Mr. Rozak:

I. Notice of Investigation Results

On June 16, 2014, your facility was inspected by Ben Horwitz on behalf of the U.S. Environmental Protection Agency (EPA) to determine your facility's compliance with UST requirements under Subtitle I of the Resource Conservation and Recovery Act (RCRA) (42 U.S.C. §§ 6991-6991m) and its implementing regulations (40 C.F.R. part 280). Based on that inspection, the EPA found your facility to be in violation of the following requirements:

- A. Failure to monitor one used oil tank at least every 30 days as required by 40 C.F.R. § 280.41(a) for one UST system from at least July 1, 2013 through June 16, 2014.
- B. Failure to retain every record for release detection monitoring as required by 40 C.F.R. § 280.45 for July 2013, November 2013, January 2014, and February 2014 for tanks 1-4 and September and October 2013 for tank 4 only.
- C. Failure to provide any release detection for underground piping (no automatic line leak detector test, and no annual line tightness test or monthly release detection monitoring) as required by 40 C.F.R. § 280.44 for lines 2-4.
- D. Failure to equip pressurized piping with an automatic line leak detector as required by 40 C.F.R. § 280.41(b)(1)(i) for line 4.

If you believe you are not in violation of these UST requirements, you may provide a written explanation, along with any supporting documentation to Anne Christopher at the EPA address shown below within 30 days of your receipt of this letter.

II. Opportunity for Expedited Settlement

Under RCRA § 9006(d), the EPA may pursue civil penalties of up to \$16,000 per day (as adjusted for inflation) for each violation of UST requirements, including, where applicable, violations of approved and authorized state program requirements. **However, the EPA is offering you an opportunity to settle this matter quickly and at a reduced penalty if you choose to follow the expedited settlement procedures outlined below within 30 days of your receipt of this letter.** This settlement process is

optional. You are not required to submit this form. If you do not submit this form, the EPA will conclude you are not interested in pursuing expedited settlement. The EPA will then consider other actions to resolve these violations including the possibility of formal (i.e., non-expedited) administrative or judicial enforcement.

If you choose to participate in this expedited settlement process, and the EPA determines you have satisfied the requirements for expedited settlement described below, the EPA will settle the outstanding violations for \$10,390.

III. Procedure for Expedited Settlement

To take advantage of the expedited settlement process, within 30 days of your receipt of this letter you must:

- A. Correct the violations identified above in this form. This means you must correct all past violations that can be corrected and ensure your USTs are in full compliance with the provisions that were identified as violated in Section I above. (Note: Some UST violations cannot be "corrected" because they require performance by, or within, a certain date or timeframe in the past.¹ For example, an owner/operator cannot correct a failure to monitor tanks every 30 days for releases (40 C.F.R. § 280.41(a)) once those 30-day terms have expired. However, those violations can be remedied in this Expedited Settlement Agreement if an owner/operator demonstrates steps were taken to prevent a reoccurrence in the future.) This return to compliance along with the costs of returning to compliance must be documented by the owner/operator.
- B. Provide a deposit for payment of the assessed penalty of \$10,390 as described below.
 - Provide a check or money order for payment sent by mail to: U.S. Environmental Protection Agency, P.O. Box 979077, St. Louis, MO 63197-9000.
 - Provide a check or money order for payment sent by overnight/common carriers (i.e., FedEx, DHL, UPS) to: U.S. Environmental Protection Agency, Government Lockbox 979077, 1005 Convention Plaza SL-MO-C2-GL, St. Louis, MO 63101.
 - Electronic deposits for payment (Vendor Express, Fedwire or Pay.gov) can also be made following these online directions: <http://www2.epa.gov/financial/makepayment>.

To ensure proper credit, include the following information with your deposit for payment.²

1. The docket number as listed on the UST Expedited Settlement Agreement and Final Order (ESA). (For checks, money orders, and other non-electronic deposits, the document number should be written on the deposit instrument.);

¹ If an owner/operator is unsure if a violation is correctable, he or she should consult with the EPA compliance officer assigned to this case.

² When making an electronic payment, you will have the ability to provide this information. For non-electronic payments, this information can be provided on a note accompanying the payment instrument (check, money order, etc.); however, the docket number should always be placed on the payment instrument.

2. Respondent's name and address (as it appears in UST ESA documents);
3. Respondent's point of contact (name and phone number);
4. EPA contact name and phone number; and
5. Reason for deposit.

C. Complete and return to the EPA the enclosed ESA. When returning the signed ESA to the EPA, you must also include:

1. Documentation demonstrating that your facility is now in compliance with UST requirements that were alleged to be violated;
2. Proof of deposit for penalty payment (e.g., copy of the check, a statement of affirmation or receipt of an electronic funds transfer); and
3. An estimate of the cost of returning to compliance.

Your signed ESA and attached documentation should be sent certified mail, return receipt requested, to:

Anne Christopher
U.S. Environmental Protection Agency
1200 Sixth Avenue, Suite 900, OCE-082
Seattle, Washington 98101

Extensions: The EPA, at its discretion, may grant an extension of up to 30 days if you can demonstrate that it is not feasible for you to come into compliance within the initial 30-day time period. You must request that extension in writing before the initial 30-day time period expires. That written request must explain why compliance within 30 days is not feasible and it must contain a schedule for when you will come into compliance (which must not extend beyond the extension period).

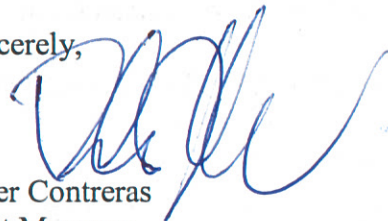
Settlement Agreement Certification: By signing the ESA, you are certifying under penalty of law that you corrected the violations, submitted true and accurate documentation of compliance, provided a deposit to pay the penalty, and that you release to the EPA your deposit for payment upon entry of the ESA. Failure to meet those conditions means you may be liable for the original violations as well as liable for making a false representation to the U.S. Government.³ By signing the ESA, you agree to waive your opportunity for a hearing or appeal concerning your violations.

By copy of this letter, the EPA is providing the Alaska Department of Environmental Conservation with notice of the UST violations listed above. For your information, the EPA's fact sheet with details on small business resources and compliance is included with this package.

³ Under 18 U.S.C. § 1001, it is a federal crime to make materially false, fictitious, or fraudulent statements or representations to the U.S. Government.

We are committed to the fair and rapid settlement of this matter. If you have any questions, or wish to discuss the general circumstances of your case, please contact the Compliance Officer assigned to your case, Anne Christopher at Christopher.anne@epa.gov or (206) 553-8293.

Sincerely,



Peter Contreras
Unit Manager

cc via email: Larry Brinkerhoff
Alaska Department of Environmental Conservation

Enclosures

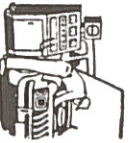
1. Expedited Settlement Agreement
2. Standard Penalty Checklist Information for Small Businesses
3. Description of Alleged Violations and Summary of Proposed Penalty
4. Penalty Guidance for Expedited Settlement Agreements (ESAs) for Underground Storage Tank Enforcement

Estimated Cost of returning to compliance

Items

A) / B) Paperwork record keeping 0⁰⁰
C)

D Automatic leak detector \$345⁰⁰ paid to tankulodgy



Soldotna Y Chevron
Your Home Town Auto Repair Center
44024 Sterling Hwy
Soldotna, AK 99669
907-262-4513

1788

DATE 10-14-14

89-6-1252

PAY TO THE ORDER OF

U.S. Environmental Protection Agency \$ 6,390⁰⁰

DOLLARS

Locally owned and operated

1 First National Bank

ALASKA MEMBER FDIC

FOR EPA Fines No. AK518

Decket No. RCRA 10-2015-0011

Grand Total

⑈001788⑈ ⑆125200060⑆ 3107 609 4⑈



Tanknology Inc.
8501 N. MoPac Expressway, Suite 400 Austin, TX 78759 (800) 964-0010

JOB CLEARANCE FORM & SITE SAFETY CHECKLIST - OVF

Policy 100-29-A
Rev: D
Revised: 8/04/2008

Site Name/ #: <u>ROZAK RENTALS</u>		Street Address: <u>44024 STERLING HWY</u>		W.O. #: <u>2318859</u>
<u>SOLDOTNA Y CHEVRON</u>		<u>SOLDOTNA, AK 99669</u>		
Arrival Time: <u>1000</u>	Departure Time: <u>1430</u>	Travel Time: <u>1 hr</u>	Others on site:	Date: <u>6/20/14</u>

Scope of Work and Tasks Performed (JSA's must be available for all tasks):

LINES, LAG, ATG

Repairs to Equipment or Parts Provided:

(1) VM LAG 2000 LD

Follow-up actions required; equipment isolated; comments:

PPE - PERSONAL PROTECTIVE EQUIPMENT REQUIRED (Check items used or mark ~ if not applicable)

- | | | | |
|---|---|--|---|
| <input checked="" type="checkbox"/> Safety Vest | <input type="checkbox"/> Safety Glasses | <input checked="" type="checkbox"/> Gloves | <input type="checkbox"/> Hearing Protection |
| <input type="checkbox"/> Steel Toe Boots | <input type="checkbox"/> Splash Goggles | <input type="checkbox"/> Hard Hat | <input type="checkbox"/> Other |

✓ PRE-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)

- ☒ Discuss safety procedures with site personnel. Nearest hospital: CENTRAL PENINSULA HOSP.
- ☒ Prior to fuel deliveries the UST system must be placed back into working order.
- ☒ Secure entire work area with barricades (cones, flags, and caution tape, pennant flags, or other perimeter guard).
- ☒ Place fire extinguishers and "No Smoking" signs in the work area.
- ☒ Implement Lockout/Tagout per API 1646 (when accessing product piping during tasks)
 - ☐ All applicable equipment disabled during test(s).
 - ☐ Secure the circuit breaker(s) with lockout devices and tags.
 - ☒ Secure nozzles with "Out of Service" bags and nylon ties.
 - ☐ Verify LOTO is complete by trying to operate pumps.
 - ☐ Close ball valves or check valves on product piping.
 - ☐ Disconnect electrical "bayonet" connector from the STP(s).

SIGN IN

General Safety Checks:

All site personnel have been informed.

Fuel delivery has been informed.

Is a fuel delivery due today? _____

LOTO procedures have been discussed and agreed.

Work areas barricaded to protect workers, staff & public.

Lead Technician Name

Lead Technician Signature

VAUGHN BOOTH

[Signature]

Site Representative Name

Site Representative Signature

Mark Rozek

[Signature]

I have discussed job clearance form with technician.

✓ POST-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)

- ☐ Remove all "Lockout/Tagout" devices.
- ☐ Run all pumps and verify there are no leaks:
 - ☐ Leak Detector Threads on STP's
 - ☐ Impact Valve Test Ports under dispensers
 - ☐ Functional Elements & Relief Screws
- ☐ Install lead wire seal on all test plugs & leak detectors that were serviced.
Count LD threads: L1 _____ L2 _____ L3 _____ L4 _____ L5 _____ L6 _____
- ☐ Check following components operational:
 - ☐ Ball floats, dry breaks & caps
 - ☐ Cathodic protection operational
 - ☐ Dispensers & POS operational
 - ☐ Drop tubes, fill adapters & caps
 - ☐ Manhole covers and sump lids
 - ☐ Shear valves are open
 - ☐ Siphon lines and manifold valves
 - ☐ Vents (not capped, plugged or isolated)
 - ☒ ATG probes, sensors, & caps
 - ☒ Dispenser panels are replaced
 - ☒ Leak detectors & vent tubes
 - ☒ Monitoring system is operational
 - ☒ Siphon lines and manifold valves
 - ☒ STP fittings and bayonet connectors
- ☒ Remove barricades.

SIGN OUT & Operator Verification of Work (OVF)

General Safety Checks:

Work area has been left tidy & safe.

Site staff are aware of work status including any remaining isolation.

Changes to equipment are documented and communicated.

All incidents, near incidents, and unsafe situations reported.

Lead Technician Name

Lead Technician Signature

VAUGHN BOOTH

[Signature]

Site Representative Name

Site Representative Signature

Mark Rozek

[Signature]

Site Representative Comments:

VAUGHN BOOTH TANKNOLOGY INSTALLED 1 NEW LD ON T4 LINE & OPS CHECK ASSESSED LAG LINES & ATG

COMPANY CONFIDENTIAL

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Printed copies of this document are uncontrolled. The current version is available in the Tanknology On-Line Document Control System.



Testing and Inspection Certificate

Tanknology Inc.
11000 North MoPac Expressway, Suite 500, Austin, TX 78759
800-800-4633 www.tanknology.com

Page 1 of 1

Test Date 6/20/2014 Tanknology WO# NW1-2318859
Test Purpose COMPLIANCE Customer PO#

Customer

ROZAK RENTALS
44024 STERLING HWY
ANCHORAGE, AK 99669

Location

Soldotna Y Chevron (Soldotna Y)
44024 Sterling HWY
Soldotna, AK 99669

Attn: MARK ROZAK
(907) 252-2335

Attn: Mark Rozak
(907) 252-2335

Test / Inspection Description	Item Tested	Date Tested	Result
Precision Line Tightness (.1 GPH)	Tank T2 Line 1 PREMIUM	6/20/2014	Pass
Precision Line Tightness (.1 GPH)	Tank T3 Line 1 Diesel	6/20/2014	Pass
Precision Line Tightness (.1 GPH)	Tank T4 Line 1 UNLEADED	6/20/2014	Pass
Line Leak Detector (3 GPH)	Tank T2 Line 1 PREMIUM	6/20/2014	Pass
Line Leak Detector (3 GPH)	Tank T3 Line 1 Diesel	6/20/2014	Pass
Line Leak Detector (3 GPH)	Tank T4 Line 1 UNLEADED	6/20/2014	Pass
Leak Detection Monitoring System Inspection	See test report for details	6/20/2014	Pass

Tanknology Representative: Brian Luci
Telephone: (800) 964-0010

Technician: Val Bodily
Technician Certification: (See forms)



Product Line Tightness Test


Page 1 of 1

Work Order: 2318859 Date: 6/20/2014
Site Name/ID: Soldotna Y Chevron / Soldotna Y
Address: 44024 Sterling HWY
City: Soldotna State: AK Zip: 99669

Tank Information	Tank # 2 Line # 1	Tank # 3 Line # 1	Tank # 4 Line # 1	Tank # Line #	Tank # Line #	Tank # Line #
Test Method	TLD-1	TLD-1	TLD-1			
Customer Tank ID	T2	T3	T4			
Product Name	PREMIUM	Diesel	UNLEADED			
Delivery Type	Pressure	Pressure	Pressure			
Test Pressure	50	50	50			
Test Start Time	10:40	11:20	10:40			
Test End Time	11:10	11:50	11:10			
Final Leak Rate	0.00	0.00	0.00			
Test Result(P/F/I)	Pass	Pass	Pass			
Test was performed per 3rd party certifications as specified in 40 CFR parts 280 and 281	Yes	Yes	Yes			

Technician Comments:

Technician Name: Val Bodily Certification #: 30942 exp: 4/6/2017

Technician Signature: 

Environmental Compliance for Petroleum Systems
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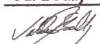
LDT 5000 Field Test Apparatus
Line Leak Detector Test

Page 1 of 1

Work Order: 2318859 Date: 6/20/2014
Site Name / ID: Soldotna Y Chevron / Soldotna Y
Address: 44024 Sterling HWY
City: Soldotna State: AK Zip: 99669

Tank ID	T2	T3	T4			
Product	PREMIUM	Diesel	UNLEADED			
Product Line	1	1	1			
Tested From	2	8	2			
Existing/New	Existing	Existing	Replacement			
Mechanical/Electronic	Mechanical	Mechanical	Mechanical			
Manufacturer/Model	Red Jacket FX1V	Vaporless LD-2000	Vaporless LD-2000			
Serial No.	50909-2920	10041151	13051480			
Pump Operating Pressure (psi)	28.00	30.00	28.00			
Calibrated Leak (ml/min)	189.0	189.0	189.0			
Calibrated Leak (gph)	3.00	3.00	3.00			
Holding PSI <small>*N/A for Electronic LD's</small>	12.00	18.00	15.00			
Resiliency (ml) <small>*N/A for Electronic LD's</small>	90.00	74.00	98.00			
Metering PSI <small>*N/A for Electronic LD's</small>	10	14	14			
Opening Time (sec) <small>*N/A for Electronic LD's</small>	5	5	4			
Test Results	Pass	Pass	Pass			

Technician Comments: T4 UNL HAD NO LD, OWNER INSTRUCTED ME TO INSTALL ONE.

Technician Name: Val Bodily Certification #: 1326
Technician Signature:  Expire Date: 1/15/2015

MONITORING SYSTEM CERTIFICATION

This form is used to document testing and servicing of tank and piping leak monitoring equipment. If required by applicable law, a copy of the completed form must be provided by the Testing Contractor or owner to the governing UST agency as required by regulation.

A. General Information

Facility Name: Soldotna Y Chevron Bldg. No.:
Site Address: 44024 Sterling HWY City: Soldotna State: AK Zip: 99669
Facility Contact Person: Mark Rozak Contact Phone No.: 907-252-2335
Make/Model of Monitoring System: EBW AUTO STIK JR Date of Testing/Servicing: 6/20/2014


B. Inventory of Equipment Tested/Certified

Check the appropriate boxes to indicate specific equipment inspected/serviced:

Tank ID: T1 - KEROSENE <input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: MAG <input type="checkbox"/> Annular Space or Vault Sensor. Model: <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <input type="checkbox"/> Fill Sump Sensor(s). Model: <input type="checkbox"/> Mechanical Line Leak Detector. Model: <input type="checkbox"/> Electronic Line Leak Detector. Model: <input checked="" type="checkbox"/> Tank Overfill / High-Level Sensor. Model: UNK <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).	Tank ID: T2 - PREMIUM <input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: MAG <input type="checkbox"/> Annular Space or Vault Sensor. Model: <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <input type="checkbox"/> Fill Sump Sensor(s). Model: <input type="checkbox"/> Mechanical Line Leak Detector. Model: <input type="checkbox"/> Electronic Line Leak Detector. Model: <input checked="" type="checkbox"/> Tank Overfill / High-Level Sensor. Model: FLAPPER <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).
Tank ID: T3 - Diesel <input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: MAG <input type="checkbox"/> Annular Space or Vault Sensor. Model: <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <input type="checkbox"/> Fill Sump Sensor(s). Model: <input checked="" type="checkbox"/> Mechanical Line Leak Detector. Model: <input type="checkbox"/> Electronic Line Leak Detector. Model: <input checked="" type="checkbox"/> Tank Overfill / High-Level Sensor. Model: FLAPPER <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).	Tank ID: T4 - UNLEADED <input checked="" type="checkbox"/> In-Tank Gauging Probe. Model: MAG <input type="checkbox"/> Annular Space or Vault Sensor. Model: <input type="checkbox"/> Piping Sump / Trench Sensor(s). Model: <input type="checkbox"/> Fill Sump Sensor(s). Model: <input checked="" type="checkbox"/> Mechanical Line Leak Detector. Model: <input type="checkbox"/> Electronic Line Leak Detector. Model: <input checked="" type="checkbox"/> Tank Overfill / High-Level Sensor. Model: FLAPPER <input type="checkbox"/> Other (specify equipment type and model in Section E on Page 2).
Dispenser ID: 1/2 <input type="checkbox"/> Dispenser Containment Sensor(s). Model: <input checked="" type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).	Dispenser ID: 3/4 <input type="checkbox"/> Dispenser Containment Sensor(s). Model: <input checked="" type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).
Dispenser ID: 5/6 <input type="checkbox"/> Dispenser Containment Sensor(s). Model: <input checked="" type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).	Dispenser ID: 7/8 <input type="checkbox"/> Dispenser Containment Sensor(s). Model: <input checked="" type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).
Dispenser ID: 9/10 <input type="checkbox"/> Dispenser Containment Sensor(s). Model: <input checked="" type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).	Dispenser ID: KER <input type="checkbox"/> Dispenser Containment Sensor(s). Model: <input type="checkbox"/> Shear Valve(s). <input type="checkbox"/> Dispenser Containment Float(s) and Chain(s).

*If the facility contains more tanks or dispensers, copy this form. Include information for every tank and dispenser at the facility.

C. Certification - I certify that the equipment identified in this document was inspected/serviced in accordance with the manufacturers' guidelines. Attached to this Certification is a Plot Plan showing the layout of monitoring equipment. For any equipment capable of generating such reports, I have also attached a copy of the report; (check all that apply): ☒ System set-up ☒ Alarm history report

Technician Name (print): Val Bodily Signature: 
Certification No.: 30935 License No.: 101
Testing Company Name: Tanknology Phone No.: (800) 800-4633
Testing Company Address: 11000 N. MoPac Expressway Suite 500 Date of Testing/Servicing: 6/20/2014

D. Results of Testing/ServiceSoftware Version Installed: UNK

Complete the following checklist:

<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	Is the visual alarm on the console operational?
<input checked="" type="radio"/> Yes	<input type="radio"/> No* <input type="radio"/> N/A	Is the audible alarm on the console operational?
<input type="radio"/> Yes	<input type="radio"/> No	Is the external visual overfill alarm (light unit) present?
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	Is the external visual overfill alarm operating properly?
<input type="radio"/> Yes	<input type="radio"/> No	Is the external audible overfill alarm (light unit) present?
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	Is the external audible overfill alarm operating properly?
90 %	<input checked="" type="radio"/> N/A	At what percent of tank(s) capacity is the external alarm programmed to trigger? <i>If different % between tanks, clarify in section E.</i>
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	Were all sensors visually inspected, functionally tested, and confirmed operational?
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	Were all sensors installed at lowest point of secondary containment and positioned so that other equipment will not interfere with their proper operation?
<input type="radio"/> Yes	<input type="radio"/> No* <input checked="" type="radio"/> N/A	For pressurized piping systems, does the turbine automatically shut down if the piping secondary containment monitoring system detects a leak, fails to operate, or is electrically disconnected? If yes: which sensors initiate positive shut-down? <i>(Check all that apply)</i> <input type="checkbox"/> Sump/Trench Sensors; <input type="checkbox"/> Dispenser Containment Sensors. Did you confirm positive shut-down due to leaks <u>and</u> sensor failure/disconnection? <input type="radio"/> Yes; <input type="radio"/> No
<input type="radio"/> Yes*	<input type="radio"/> No	Was any monitoring equipment replaced? If yes, identify specific sensors, probes, or other equipment replaced and list the manufacturer name and model for all replacement parts in Section E, below.
<input type="radio"/> Yes*	<input type="radio"/> No	Was liquid found inside any secondary containment systems designed as dry systems? <i>(Check all that apply)</i> <input type="checkbox"/> Product; <input type="checkbox"/> Water. If yes, describe causes in Section E, below.
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Was monitoring system set-up reviewed to ensure proper settings? Attach set up reports, if applicable
<input checked="" type="radio"/> Yes	<input type="radio"/> No*	Is all monitoring equipment operational per manufacturer's specifications?

* In Section E below, describe how and when these deficiencies were or will be corrected.

E. Comments:

NO SENSORS PRESENT

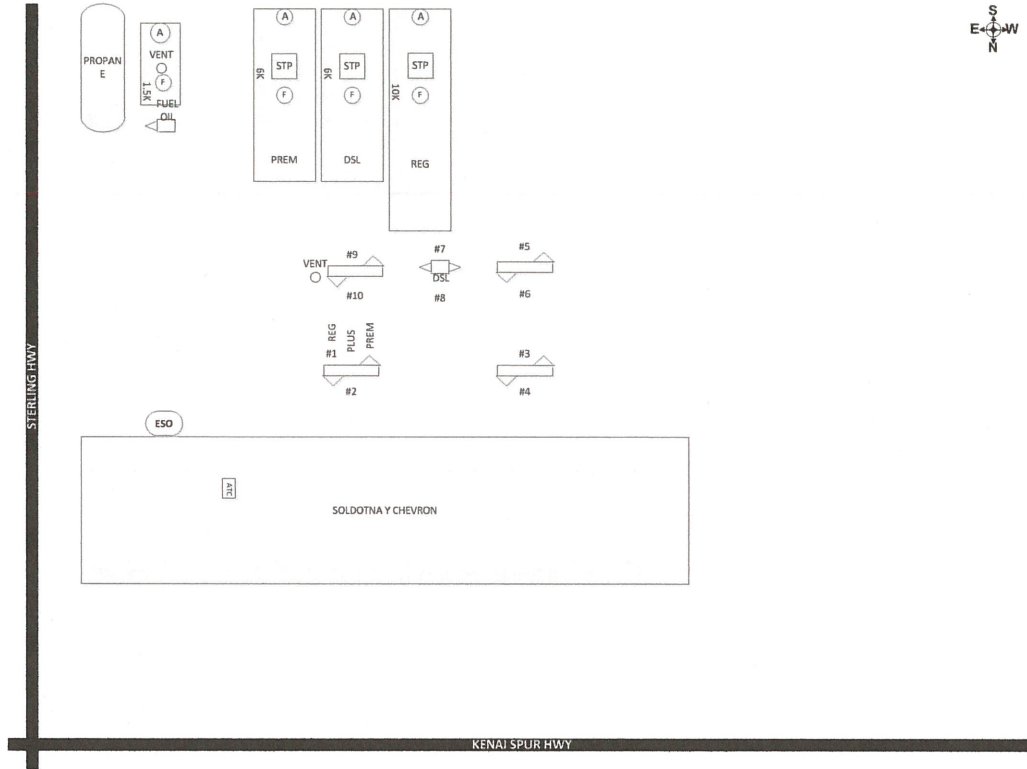






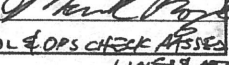
Site Diagram

(This site diagram is for reference only and is not drawn to scale)

Work Order: 2318859
Site ID / Name: Soldotna Y / Soldotna Y Chevron
Address: 44024 Sterling HWY
City: Soldotna

State: AK Zip: 99669



		Tanknology Inc. 8501 N. MoPac Expressway, Suite 400 Austin, TX 78759 (800) 964-0010		Policy 100-29-A Rev: D Revised: 8/04/2008	
JOB CLEARANCE FORM & SITE SAFETY CHECKLIST - OVF					
Site Name: <u>ROZAK BROTHERS</u> <u>SOLOOTNA Y CHEMON</u>		Street Address: <u>44024 SPERLING HWY</u> <u>SOLOOTNA, TX 79669</u>		W.O. # <u>2318859</u>	
Arrival Time: <u>1000</u>		Departure Time: <u>1430</u>		Date: <u>6/20/14</u>	
Scope of Work and Tasks Performed (JSA's must be available for all tasks): <u>LINES, LBS, ATG</u>					
Repairs to Equipment or Parts Provided: <u>(1) VMI LQ200 LD</u>					
Follow-up actions required; equipment isolated; comments:					
PPE - PERSONAL PROTECTIVE EQUIPMENT REQUIRED (Check items used or mark ~ if not applicable)					
<input checked="" type="checkbox"/> Safety Vest <input type="checkbox"/> Steel Toe Boots		<input checked="" type="checkbox"/> Safety Glasses <input type="checkbox"/> Splash Goggles		<input checked="" type="checkbox"/> Gloves <input type="checkbox"/> Hard Hat	
				<input type="checkbox"/> Hearing Protection <input type="checkbox"/> Other	
PRE-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)					
1. <input checked="" type="checkbox"/> Discuss safety procedures with site personnel. Nearest hospital: <u>CENTRAL PENINSULA HOSP.</u> 2. <input checked="" type="checkbox"/> Prior to fuel deliveries the UST system must be placed back into working order. 3. <input checked="" type="checkbox"/> Secure entire work area with barricades (cones, flags, and caution tape, pennant flags, or other perimeter guard). 4. <input checked="" type="checkbox"/> Place fire extinguishers and "No Smoking" signs in the work area. 5. <input checked="" type="checkbox"/> Implement Lockout/Tagout per API 1646 (when accessing product piping during tasks)					
<input type="checkbox"/> All applicable equipment disabled during test(s). <input checked="" type="checkbox"/> Secure nozzles with "Out of Service" bags and nylon ties. <input type="checkbox"/> Close ball valves or check valves on product piping.					
<input type="checkbox"/> Secure the circuit breaker(s) with lockout devices and tags. <input type="checkbox"/> Verify LOTO is complete by trying to operate pumps. <input type="checkbox"/> Disconnect electrical "bayonet" connector from the STP(s).					
SIGN IN General Safety Checks: All site personnel have been informed. Fuel delivery has been informed. Is a fuel delivery due today? LOTO procedures have been discussed and agreed. Work areas barricaded to protect workers, staff & public.		Lead Technician Name <u>VALDEN BOSCH</u>		Lead Technician Signature 	
		Site Representative Name <u>Mark Rozak</u>		Site Representative Signature 	
I have discussed job clearance form with technician.					
POST-TEST PROCEDURES (Check each item completed or mark ~ if not applicable)					
1. <input type="checkbox"/> Remove all "Lockout/Tagout" devices. 2. <input type="checkbox"/> Run all pumps and verify there are no leaks: <input type="checkbox"/> Leak Detector Threads on STP's <input type="checkbox"/> Impact Valve Test Ports under dispensers <input type="checkbox"/> Functional Elements & Relief Screws 3. <input type="checkbox"/> Install lead wire seal on all test plugs & leak detectors that were serviced. Count LD threads: L1 ____ L2 ____ L3 ____ L4 ____ L5 ____ L6 ____ 4. <input checked="" type="checkbox"/> Check following components operational:					
<input type="checkbox"/> Ball floats, dry breaks & caps <input type="checkbox"/> Containment sumps are dry <input checked="" type="checkbox"/> Dispenser panels are replaced <input type="checkbox"/> Leak detectors & vent tubes <input checked="" type="checkbox"/> Monitoring system is operational <input type="checkbox"/> Siphon lines and manifold valves <input type="checkbox"/> STP fittings and bayonet connectors					
<input type="checkbox"/> ATG probes, sensors, & caps <input type="checkbox"/> Cathodic protection operational <input type="checkbox"/> Dispensers & POS operational <input checked="" type="checkbox"/> Drop tubes, fill adapters & caps <input checked="" type="checkbox"/> Manhole covers and sump lids <input type="checkbox"/> Shear valves are open <input type="checkbox"/> Siphon lines and manifold valves <input type="checkbox"/> Vents (not capped, plugged or isolated)					
5. <input checked="" type="checkbox"/> Remove barricades.					
SIGN OUT & Operator Verification of Work (OVF) General Safety Checks: Work area has been left tidy & safe. Site staff are aware of work status including any remaining isolation. Changes to equipment are documented and communicated. All incidents, near incidents, and unsafe situations reported.		Lead Technician Name <u>Valden Bosch</u>		Lead Technician Signature 	
		Site Representative Name <u>Mark Rozak</u>		Site Representative Signature 	
Site Representative Comments: <u>VAL BOSCH & TANKNOLOGY INSTALLED 1 NEW LD ON T4 UNL & OPS CHECK ATSSER LULLS</u> <u>LINES & ATG</u>					
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SITE SAFETY CHECKLIST



Page 1 of 1

Customer

Location

Soldotna Y Chevron (Soldotna Y)
44024 Sterling HWY
Soldotna, AK 99669

Attn: Mark Rozak
(907) 252-2335

Technician: Val Bodily
Technician Certification: (See forms)

**TLD-1****Product Line Tightness Test**

Page 1 of 1

Work Order: 2305908 Date: 6/25/2012
Site Name/ID: Soldotna Y Chevron / Soldotna Y
Address: 44024 Sterling HWY
City: Soldotna State: AK Zip: 99669

Tank Information	Tank # 2 Line # 1	Tank # 3 Line # 1	Tank # 4 Line # 1	Tank # Line #	Tank # Line #	Tank # Line #
Customer Tank ID	T2	T3	T4			
Product Name	PREMIUM	Diesel	UNLEADED			
Delivery Type	Pressure	Pressure	Pressure			
Test Start Time	09:30	10:20	09:30			
Test End Time	10:10	11:00	10:10			
Final Leak Rate	0.00	0.00	0.00			
Test Result(P/F/I)	Pass	Pass	Pass			
Test was performed per 3rd party certifications as specified in 40 CFR parts 280 and 281	Yes	Yes	Yes			

Technician Comments:

Technician Name: Val Bodily Certification #: 30942 exp: 4/5/2014

Technician Signature: 



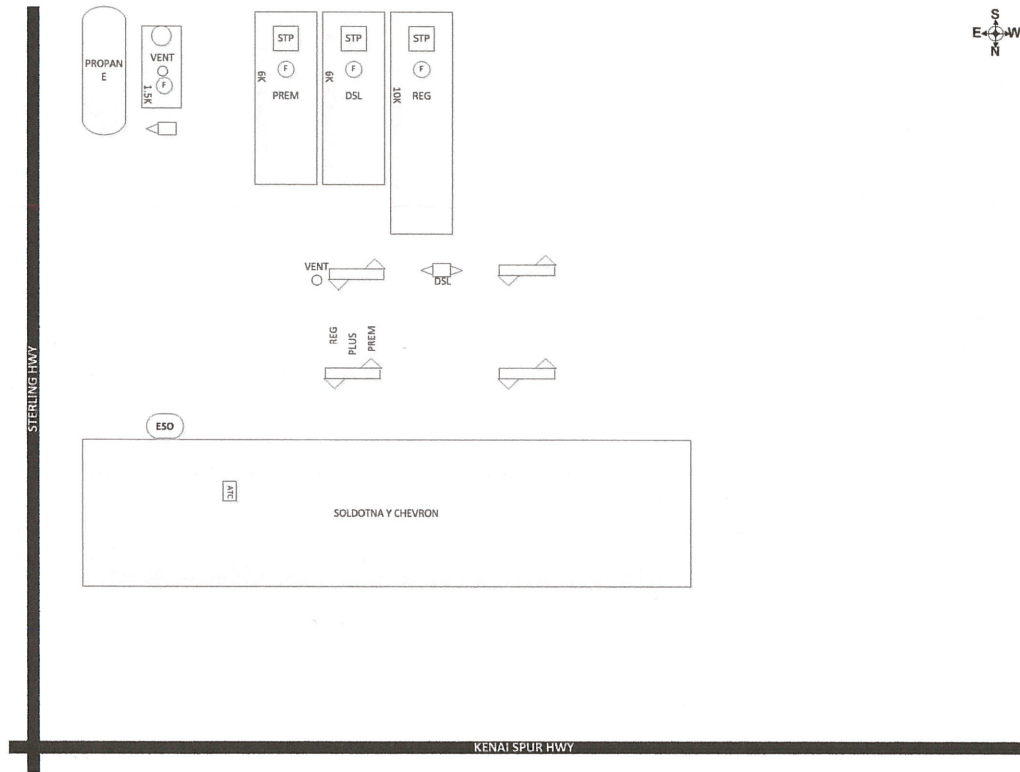
Site Diagram

(This site diagram is for reference only and is not drawn to scale)


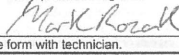

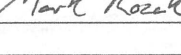
Work Order: 2305908
Site ID / Name: Soldotna Y / Soldotna Y Chevron
Address: 44024 Sterling HWY
City: Soldotna

Date: 6/25/2012

State: AK Zip: 99669



	Tanknology Inc. 8501 N. MoPac Expressway, Suite 400 Austin, TX 78759 (800) 964-0010		Policy 100-29-A Rev: D Revised: 8/04/2008
	JOB CLEARANCE FORM & SITE SAFETY CHECKLIST - OVF		

Site Name/ID: SOLDOTNA 4 CHEVRON		Street Address: 44024 STERLING HWY SOLDOTNA, AR 72669		W.O. # 2305908
Arrival Time: 0845	Departure Time: 1130	Travel Time:	Others on site:	Date 6/26/12
Scope of Work and Tasks Performed (JSA's must be available for all tasks): LINES				
Repairs to Equipment or Parts Provided: 1) RT FUNCTIONAL ELEMENT KIT				
Follow-up actions required; equipment isolated; comments:				
PPE - PERSONAL PROTECTIVE EQUIPMENT REQUIRED (Check items used or mark ~ if not applicable) <input checked="" type="checkbox"/> Safety Vest <input checked="" type="checkbox"/> Safety Glasses <input checked="" type="checkbox"/> Gloves <input type="checkbox"/> Hearing Protection <input checked="" type="checkbox"/> Steel Toe Boots <input type="checkbox"/> Splash Goggles <input type="checkbox"/> Hard Hat <input type="checkbox"/> Other				
PRE-TEST PROCEDURES (Check each item completed or mark ~ if not applicable) 1. <input checked="" type="checkbox"/> Discuss safety procedures with site personnel. Nearest hospital: CENTRAL PENINSULA GEN/HOSP. 2. <input checked="" type="checkbox"/> Prior to fuel deliveries the UST system must be placed back into working order. 3. <input checked="" type="checkbox"/> Secure entire work area with barricades (cones, flags, and caution tape, pennant flags, or other perimeter guard). 4. <input checked="" type="checkbox"/> Place fire extinguishers and "No Smoking" signs in the work area. 5. <input checked="" type="checkbox"/> Implement Lockout/Tagout per API 1646 (when accessing product piping during tasks) <input type="checkbox"/> Inapplicable equipment disabled during test(s). <input type="checkbox"/> Secure the circuit breaker(s) with lockout devices and tags. <input type="checkbox"/> Secure nozzles with "Out of Service" bags and nylon ties. <input type="checkbox"/> Verify LOTO is complete by trying to operate pumps. <input type="checkbox"/> Close ball valves or check valves on product piping. <input type="checkbox"/> Disconnect electrical "bayonet" connector from the STP(s).				
SIGN IN General Safety Checks: All site personnel have been informed. Fuel delivery has been informed. Is a fuel delivery due today? LOTO procedures have been discussed and agreed. Work areas barricaded to protect workers, staff & public.		Lead Technician Name: Valen Bodin Lead Technician Signature:  Site Representative Name: Mark Rozak Site Representative Signature:  I have discussed job clearance form with technician.		
POST-TEST PROCEDURES (Check each item completed or mark ~ if not applicable) 1. <input type="checkbox"/> Remove all "Lockout/Tagout" devices. 2. <input type="checkbox"/> Run all pumps and verify there are no leaks: <input type="checkbox"/> Impact Valve Test Ports under dispensers <input type="checkbox"/> Leak Detector Threads on STP's <input type="checkbox"/> Functional Elements & Relief Screws 3. <input type="checkbox"/> Install lead wire seal on all test plugs & leak detectors that were serviced. Count LD threads: L1 ____ L2 ____ L3 ____ L4 ____ L5 ____ L6 ____ 4. <input checked="" type="checkbox"/> Check following components operational: <input type="checkbox"/> Ball floats, dry breaks & caps <input type="checkbox"/> ATG probes, sensors, & caps <input type="checkbox"/> Containment sumps are dry <input type="checkbox"/> Cathodic protection operational <input checked="" type="checkbox"/> Dispenser panels are replaced <input type="checkbox"/> Dispensers & POS operational <input type="checkbox"/> Leak detectors & vent tubes <input type="checkbox"/> Drop tubes, fill adapters & caps <input type="checkbox"/> Monitoring system is operational <input checked="" type="checkbox"/> Manhole covers and sump lids <input type="checkbox"/> Siphon lines and manifold valves <input type="checkbox"/> Shear valves are open <input type="checkbox"/> STP fittings and bayonet connectors <input type="checkbox"/> Siphon lines and manifold valves <input type="checkbox"/> Vents (not capped, plugged or isolated) 5. <input checked="" type="checkbox"/> Remove barricades.				
SIGN OUT & Operator Verification of Work (OVF) General Safety Checks: Work area has been left tidy & safe. Site staff are aware of work status including any remaining isolation. Changes to equipment are documented and communicated. All incidents, near incidents, and unsafe situations reported.		Lead Technician Name: Valen Bodin Lead Technician Signature:  Site Representative Name: Mark Rozak Site Representative Signature:  Site Representative Comments:		

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